



Disabilities Network of Eastern CT, Inc.

238 W. Town St. Norwich CT 06360

TESTIMONY JOINT APPROPRIATIONS AND HUMAN SERVICES COMMITTEES SEPTEMBER 27, 2011

Good Morning Senators and Representatives:

My name is Cathy Ferry. I live in Portland, CT. I am the Executive Director of the Disabilities Network of Eastern CT (DNEC), the consumer governed and operated independent living center based in Norwich, and serving all of eastern CT.

I am speaking on behalf of persons with disabilities and elders who are on the various waivers, including the Katie Beckett Waiver. As you know, the Katie Beckett Waiver allowed a severely disabled child to receive services in the community, at home, without having to follow the then standard protocol of being placed in an institution.

Today you will hear technical details about adding state funded slots to, and renewing, the Katie Beckett and ABI waivers. You have asked, wisely, why the slot requests and extensions are so few. There are over 400 people on the Katie Beckett Waiver, alone.

The Money Follows the Person (MFP) pilot program, which moves persons from institutions to the community, with appropriate wrap around services, uses the various waivers to fund these needed community services after the initial funding period expires. All of these waivers are capitated, have their own designated populations, conditions, procedures and protocols. The culture of each varies from state agency to state agency; DSS, DDS, DMHAS, Eldercare, ABI, self directed.

The important commonality among them is that funding streams are changed so that individuals, who would otherwise be in institutions, get to live in the community, with family, or in their own domicile, with the individualized services and supports they need to thrive. This change not only improves their lives, it actually saves CT money in the long run.

The Olmsted decision, which states that all individuals have the right to live in the least restrictive environment in the community of their choice, has changed the human service care landscape nationwide. Other states and the federal government have the hard data and best practice models to show that this paradigm shift works, improves the prognosis and quality of consumers' lives, AND saves money!

Moving people from institutions, or keeping them out of institutions, are what independent living centers like DNEC have been about for more than twenty years. We are governed and operated by people with disabilities for people with disabilities. We believe in personal choice, personal planning and ability. We are MFP providers, but this is nothing new to us.

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I have seen, firsthand, the profound difference in a woman who has spent 15 years in a nursing home, living by its' rules and schedules, now living in her own apartment, making coffee and breakfast for herself, when she wants, sitting at her kitchen table watching the birds in the feeder outside her window. Her whole life has changed for the better, because we used a pilot "rebalancing" program to change her environment and her personal choices.

This is not only radical, it is right and, ultimately, it saves money and improves our society for us all. We are the richer for the contributions and lives that she, and countless others like her, share with us. She is not hidden, forgotten, warehoused, patronized and pitied by the able bodied. We too, like her, want to live our lives in our own ways, with our families, having personal choice, assistance and accommodations as we need them, to be in this world. Even though she and others may look and act differently from us, we are all the same. Whether by genetic cause, traumatic birth, accident, illness, aging, or disability, the need for a little or a lot of help comes to us all before we leave this world.

The understanding and the law exist now to make a major systems change. The system mostly wants to change. The cost savings and positive outcomes are proven. What CT lacks right now is the will to commit to this positive and progressive vision. Yes, financial times are tough. Yes, in order to make this rebalancing system change happen, we need to front load state funds. Yes the process is byzantine and convoluted. Yes, Congress is messing with the federal budget, from whence the reimbursement comes.

But you, as our elected leaders, know what is right. You can look at the big picture, and in the long run, the cost savings. You can mandate, monitor and hold the system accountable. Also, you can see that woman, as I did, and all the others like her, eating the breakfast she wants, when she wants, at her own table, just like you and me.

There are forces and individuals who will urge you to be cautious, to balance the budget now, to continue to do things in the way we always have. There are groups who have a vested interest in the status quo, or who fear for those who are seen as weak and needy, that they will not be safe out of institutions.

Connecticut is the land of steady habits, but we are also the state that has always planted and sustained. Now is a moment to plant a new vine - a system change. I urge you to renew and expand these waivers, and the others. But let that action be a necessary and intermediary step towards fully implementing the Olmsted decision, merging waivers and silos. I urge you to follow the recommendations of the Long Term Care Planning Council and others, and to move forward, now, to fully implement a rebalancing of care from institutions to the community in Connecticut. Not only will you save money, you will save and grow people and communities. We will be able to share our common lot, and to know and to support each other. Our state, and we as individuals, will be richer and stronger because of it. To quote another politician, "Do it now!"

Thank you.